#### POWER OF ATTORNEY

THIS DURABLE POWER OF ATTORNEY is given by me GREGORY COOK
(Social Security Number , residing at 420 ALMOND STREET,
VINELAND, NEW JERSEY on this day of December 2011.

### I. Nature of Power

THIS IS A DURABLE POWER OF ATTORNEY for all personal and financial management and the Authority of my Attorney-in-fact shall not terminate if I become disabled or incapacitated or in the event of later uncertainty as to whether I am dead or alive.

### II. Previous Power of Attorney

I revoke any previous durable power of attorney granted by me.

#### III. Attorney-in-fact

I APPOINT, ALICIA RODRIGUEZ, residing at 420 ALMOND STREET, VINELAND, NEW JERSEY, my true and lawful Attorney-in-fact.

## IV. Governing Law

This instrument will be governed by the laws of the State of New Jersey. Further my Attorney-in-fact is directed to act in accordance with the laws of the State of New Jersey at any time she may be acting on my behalf.

# V. Delegation of Authority

My Attorney-in-fact may not delegate my authority granted under this document.

## VI. Liability of Attorney-in-fact

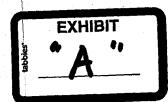
My Attorney-in-fact will not be liable to me, my estate, my heirs, successors or assigns for any action taken or not taken under this document, except for willfull misconduct or gross negligence.

#### VII. Effective Date

This Power of Attorney will start immediately and will continue notwithstanding my mental incapacity or mental infirmity which may occur after my execution of this Power of Attorney.

## VIII. Powers of Attorney-in-Fact

My Attorney-in-fact will have the following power(s):



- 1. To buy, sell, exchange, or otherwise deal with chattels and goods (tangible personal property).
- 2. To control bank and financial interests.
- 3. To control or direct personal business or business interests.
- 4. To control any insurance or annuity policy.
- 5. To act for me in estate, trust, and other beneficiary transactions.
- 6. To act for me in all claims and litigation matters.
- 7. To act for me in securing all governmental benefits owed to me.
- 8. To act for me in all matters affecting my retirement plans and benefits.
- 9. Any expenditures required, such as home renovation, to stay at home as long as possible.
- 10. Any expenditures for maintenance, education, medical care of myself and family.
- 11. To take any action required to fulfill tax obligations.
- 12. The power to provide gifts to family on special occasions.
- 13. The power to employ any professionals for the my care or my family.
- 14. To do any act or thing that I could do in my own person if personally present.

I hereby give to my attorney full authority and power to do anything and everything whatsoever required or obligated to be done, at least to the extent I could or might do, with full power of substitution and revocation. I hereby confirm and sanction all that said attorney shall lawfully do or cause to be done, acting on my behalf and in my stead.

This Power of Attorney may be revoked by me at any time by providing written notice to my Agent.

being first duly sworn, such person acknowledged that he or she executed said instrument

NOTARY PUBLIC

My Commission Expires: 6/16/2016

for the purposes therein contained as his or her free and voluntary act and deed.

DANIEL KIEL NOTARY PUBLIC STATE OF NEW JERSEY MY COMMISSION EXPIRES JUNE 16, 2016 Jeniter Mendoza